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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 09/313,881 05/18/1999 PAT 6,235,001

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 4	TOTAL CLAIMS 27 4	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>M. J. Smith</i>	Initials mjd		

ADDRESS

29941
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TITLE

Surgical needle with hand-actuable lock mechanism

FILING FEE RECEIVED 523	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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